



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E365444**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	14-02589
LOCAL AGENCY CODING	0664
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIBAL RESERVATION	
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M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	10	15	2014	1653	31			N	E	IN	0664
								S	W	OF	

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
SR 92	BLOCK NO. <input checked="" type="checkbox"/>	12300
	MILE POST	

DISTANCE	OF (REFERENCE OR CROSS STREET)
	GRADE RD

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4255838171
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LAST NAME	WAHLBERG	FIRST NAME	WYATT	MIDDLE INITIAL	L
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STREET NEW ADDRESS	10621 168TH AVE NE
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CITY	GRANITE FALLS	ST	WA	ZIP	982528008
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GDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	WAHLBWL024NQ	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	08	18	1998
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	AFD3473	STATE	WA	VIN#	1J4FA49S62P739672
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2002	MAKE	JEEP	MODEL	WRJP	STYLE	2W	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. LISA WAHLBERG PO BOX 336 LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 987 018 253
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4259037127
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LAST NAME	BROCKES	FIRST NAME	CHRISTOPHER	MIDDLE INITIAL	J
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STREET NEW ADDRESS	9430 105TH AVE NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982588969
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GDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	BROCKCJ307M4	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	07	24	1970
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	7	NATURE OF INJURIES
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LICENSE PLATE #	AEV6850	STATE	WA	VIN#	1B3ES56C24D611680
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	DODG	MODEL	NEO4D	STYLE	4D	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	AAA	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. JOHNNY BROCKES 13512 SE 280TH ST KENT WA 98042

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 964 976 420
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
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KERRY BERNHARD

120

WA0311900



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E365444**

CASE # **14-02589**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		<b>HEILMAN HANNAH L</b>																
ADDRESS & PHONE #		<b>UNK LAKE STEVENS WA 98258</b>																
SEX		F		D.O.B. MMDDYYYY		08		12		2002								
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	9	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES <b>HEAD PAIN</b>
NAME (LAST, FIRST, MIDDLE INITIAL)		<b>ENO LAUREN E</b>																
ADDRESS & PHONE #		<b>UNK LAKE STEVENS WA 98258</b>																
SEX		F		D.O.B. MMDDYYYY		11		30		2001								
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	8	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES <b>BACK PAIN</b>
NAME (LAST, FIRST, MIDDLE INITIAL)		<b>CASTLE TIM P</b>																
ADDRESS & PHONE #		<b>9933 38 PL SE LAKE STEVENS WA 98258 4255839144</b>																
SEX		M		D.O.B. MMDDYYYY		03		21		1995								
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

On 1015/2014 at approximately 1653 hours, Unit 1 was travelling westbound on SR 92 behind Unit 2. Unit 2 slowed to a stop for traffic that was turning left onto Grade Rd from SR 92. The driver of Unit 1 struck the back of Unit 2.

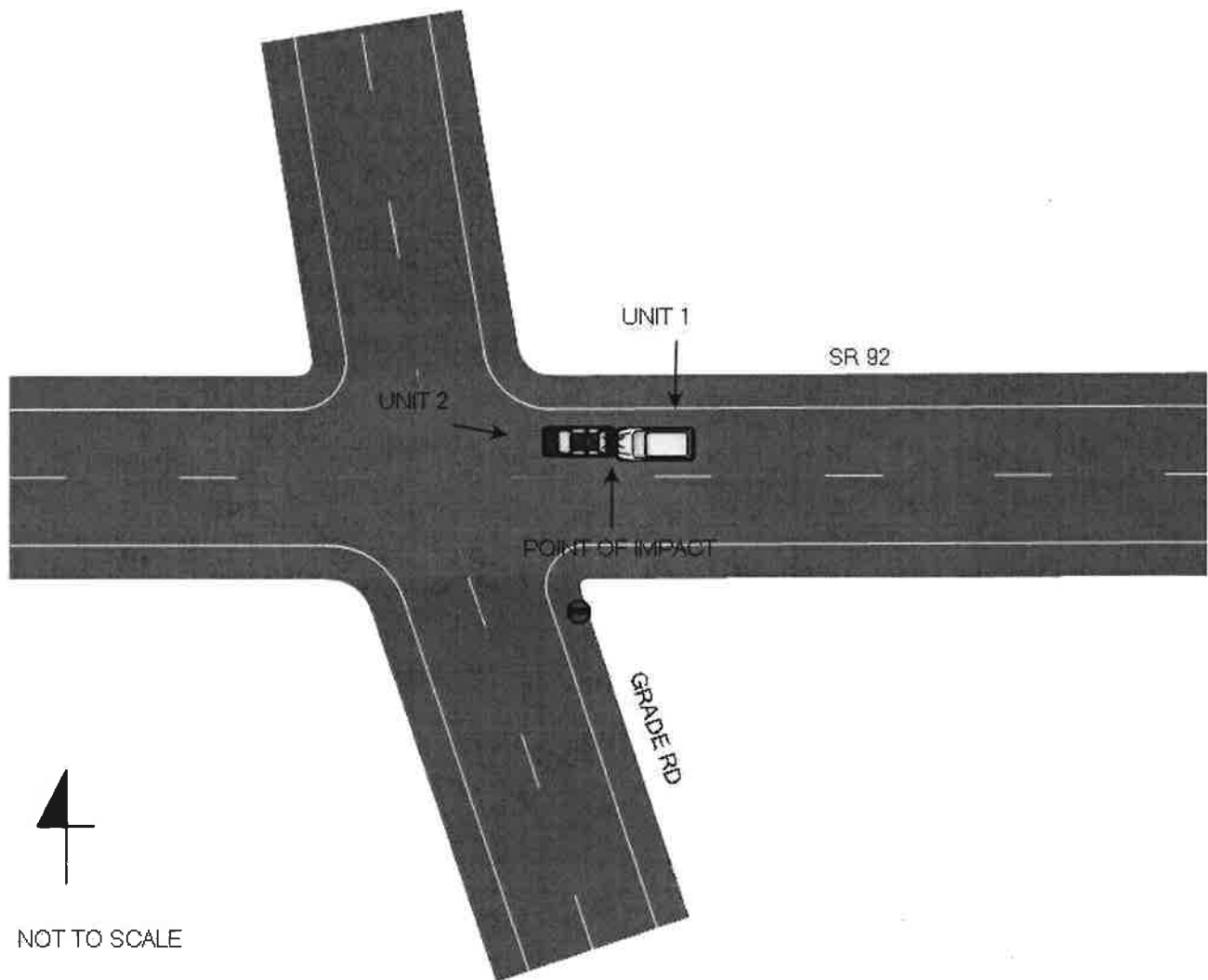
The driver and passengers in Unit 2 complained of neck and back pain. All three were evaluated by aid, none were transported.

Unit 2 was towed at the owners request by AAA.

Unit 1 was driven from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

<b>KERRY BERNHARD</b>		<b>10-16-14 08:03 AM</b>	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY <b>BOB SUMMERS 079</b>		DATE <b>10/16/2014 9:04:35 PM</b>	
BADGE OR ID #	120	ORI #	WA0311900
TIME POLICE DISPATCHED		4:53 PM	
TIME POLICE ARRIVED		4:55 PM	



# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER 14-02589



### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Wahlberg, Wyatt Lloyd	RACE	ETH	SEX M	DOB 8-18-98	AGE 16	HGT 6'4"	WGT 140	HAIR BLK	EYES BLU
STREET ADDRESS 10621 168th Ave NE Granite Falls WA		CITY Granite Falls		STATE WA		ZIP 98252		RES. STATUS		
HOME PHONE 360-691-2100		CELL PHONE 425-583-8179		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS wahlbergfamily@hotmail.com								

I, \_\_\_\_\_, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

A truck turned without using his turn signal so I did not slow down because I didn't know when he turned I did not see his car until I was unable to stop and skidded into him.

LSPD  
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Wyatt Wahlberg	DATE SIGNED 9-15-14	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: K. BELMONT #120	DATE SIGNED 10-15-14	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02589



### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) CASTLE, TIM, PAUL	RACE	ETH	SEX M	DOB 03/21/95	AGE 19	HGT 5'10"	WGT 150 LBS	HAIR BRN	EYES BLU
STREET ADDRESS 9933 38TH PL. SE.		CITY LAKE STEVENS			STATE		ZIP	RES. STATUS		
HOME PHONE		CELL PHONE 425-583-9144			PLACE OF EMPLOYMENT NELSON & SONS					
WORK PHONE		EMAIL ADDRESS CASTLETIM321@HOTMAIL.COM								

I, \_\_\_\_\_, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I WAS DRIVING ON HWY 92 AND SAW A YELLOW JEEP HIT A RED DODGE NEON FROM BEHIND. THEY WERE BOTH DRIVING THE OPPOSITE WAY HEADING TOWARDS ~~GRADE RD.~~ LAKE STEVENS. THIS WAS AT THE CROSS STREET OF HWY 92 AND GRADE RD. AT THAT POINT, I PULLED OVER AND REPORTED IT.

LSPD  
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10/15/14	LOCATION SIGNED ON SCENE
OFFICER/NUMBER: R. BERNHARD #720	DATE SIGNED 10-15-14	LOCATION SIGNED LR STEVENS, WA

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PAGE 1 OF 1



LAKE STEVENS POLICE EVIDENCE UNIT	Primary Officer/Badge Number <i>R. BELWHAIR #720</i>	Case Number <i>14-02589</i>
Type of Crime: Felony / Misdemeanor (Circle)	Type of Case: <i>ACCIDENT</i>	Date/Time: <i>10/6-11 1343</i>

Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING  
 \*Evi will be held until court dispo or when the Statute of Limitations has expired  
 \*Found and Sfkng will be held for 60 days or 60 days past owner notification

Case # 14-02589

Item # <i>14-1</i>	Item <i>Photo CD</i>		Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber (Further Description)							
	Action # <i>3</i>	Serial #	Where Found	Weight of Narcotic				
Owner's Name <i>LSPD</i>		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>#720</i>								

Item #	Item		Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber (Further Description)							
	Action #	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item		Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber (Further Description)							
	Action #	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item		Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber (Further Description)							
	Action #	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item		Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber (Further Description)							
	Action #	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

LSPD  
ORIGINAL

Incident History for: #SS14020483 Xref: #AG14002944

Case Numbers: \$SS14002589

Entered 10/15/14 16:53:00 BY SPDF27 SP0226

Dispatched 10/15/14 16:53:31 BY SPSC40 SP0166

Enroute 10/15/14 16:53:31

Onscene 10/15/14 16:55:28

Closed 10/15/14 17:32:47

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS001 Fire BLK: AG1719 Map Page: 377F-4 Group: SS1 Beat: NORT

Src: T

Loc: GRADE RD/SR 92 ,LKS (V)

# Loc Info:

Name:	Addr:	Phone:
/1653 (SP0226) ENTRY	, 2 VEH REARENDER IN THE INTERSECTION, JEEP AND DODGE NEON, ONE ADULT W/ NE CK PAIN	
/1653 CROSS	#AG14002944	
/1653 (SP0166) MISC	, BRCST	
/1653 DISPER 19D3	#SS120 BERNHARD, OFFICER (KERRY)	
/1653 ASSTER 19D1	[CALLOW RD/SR 92 ,LKS]	
	#SS75 CHRISTENSEN, OFCR (CHAD)	
	#SS132 KILROY, OFFICER (JOSH)	
/1655 ONSCNE 19D3		
/1655 CHANGE	LOC: CALLOW RD/SR 92 ,LKS --> GRADE RD/SR 92 ,LKS	
/1655 (SS75 ) *ONSCNE 19D1		
/1702 (SS120 ) *ASNCAS 19D3	\$SS14002589	
/1704 (SP0166) MISC 19D1	, AAA TOW - CHRISTOPHER J. BROCKES - MEMBER NUMBER 2460875019 - LIC/AEV6850 - REQ FLATBED	
/1705 ROTREQ 19D1	TOW 0000 Z18 AAA - PRIVATE CITIZEN REQUEST	
	S 8004586615	
/1713 MISC	, AAA WILL HAVE R&R STAR TOWING ENRT, GAVE EXTENDED ETA BUT WILL MAKE IT A PRIORITY	
/1713 MISC	, PER AAA TOW COMPANY WILL CALL IF THEY HAVE AN EXTENDED ETA	
/1713 MISC	, AAA ALSO ADVISE OF THE FLATBED REQ	
/1716 (SS75 ) *CLEAR 19D1	D/D	
/1732 (SP0224) CLEAR 19D3	D/H	
/1732 CLOSE 19D3		

LSPD  
ORIGINAL